

PTO/SB/01 (12-97)

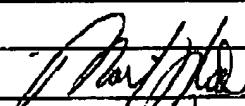
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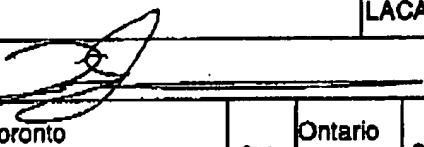
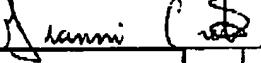
Please type a plus sign (+) inside this box +**DECLARATION — Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)			
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental prior art data sheet PTO/SB/02B attached hereto.					
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: <input checked="" type="checkbox"/> Customer Number 1059 → <input type="checkbox"/> Place Customer Number Bar Code Label here <input type="checkbox"/> OR <input type="checkbox"/> Registered practitioner(s) name/registration number listed below					
Name	Registration Number	Name	Registration Number		
Daniel R. Bereskin	22,257	H. Samuel Frost	31,696		
Richard J. Parr	22,836	Philip Mendes da Costa	33,106		
H. Roger Hart	26,426	Robert B. Strey	33,108		
David W.R. Langton	27,747	John R. Rudolph	38,003		
C. Lloyd Sargison	29,245	Robin L.A. Coxter	38,016		
Timothy J. Sinnott	31,083	Michael E. Cluries	38,026		
<input checked="" type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.					
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number 1059		<input type="checkbox"/> OR	<input type="checkbox"/> Correspondence address below		
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Address	Box 401				
Address	40 King Street West				
City	Toronto	State	Ontario		
Country	Canada	Telephone	(416) 364-7311		
		ZIP	M5H 3Y2		
		Fax	(416) 361-1398		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle if any)		Family Name or Surname			
MARK	RIDER				
Inventor's Signature				 Date	
Residence: City	Toronto	State	Ontario	Country	Canada
Post Office Address	27 Stratford Crescent				
Post Office Address					
City	Toronto	State	Ontario	ZIP	M4N 2Z6
				Country	Canada
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto					

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PTO/SB/02A (3-97)
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Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
TONY		LACAVERA					
Inventor's Signature							28/5/99 Date
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
GIANNI		CRETA					
Inventor's Signature							28/5/99 Date
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Post Office Address	43 Sandale Gardens						
Post Office Address							
City	Toronto	State	Ontario	ZIP	M3H 2V3	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature							Date
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to: the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION		REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)	
Name	Registration Number	Name	Registration Number
Micheline Gravelle	40,261	Robert H.C. MacFarlane	40,366
Andrew I. McIntosh	40,453	Stephen M. Benney	41,563
Shawn D. Jacka	43,379		

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13408.00009

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
MARK RIDER, ET AL.) : Examiner: S. Ashburn
Application No.: NYA) : Group Art Unit: 3713
Filed: June 6, 2001) :
For: LARGE SCREEN GAMING) : June 6, 2001
SYSTEM AND FACILITY) :
THEREFOR)

Commissioner for Patents
Washington, D.C. 20231

ASSOCIATE POWER OF ATTORNEY

Sir:

Please recognize Richard P. Bauer (Registration No. 31,588 as Associate Attorney to prosecute this application and transact all business in the Patent and Trademark Office connected herewith.

Respectfully submitted,



Robert B. Storey
Attorney for Applicant
Registration No. 33,108

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Form #20